

## **Center for Health Information Technology & Innovative Care Delivery**

### ***Announcement for Grant Applications***

**Grant ID Number:** MHCC 15-001

**Issue Date:** August 18, 2014

**Title:** Long-Term Care/Hospital Telehealth Pilot

#### **I. PURPOSE**

Maryland law<sup>1</sup> authorizes the Maryland Health Care Commission (MHCC) to award grants. In accordance with State law, the MHCC, in conjunction with the Maryland Health Quality and Cost Council, reconvened the Telemedicine Task Force (task force) to identify opportunities to expand the use of telemedicine to improve health status and care delivery throughout the State.<sup>2</sup> The task force is developing legislative recommendations regarding telehealth use case categories, supported by existing technologies and facilitated by a telehealth provider directory.

The MHCC intends to award a grant up to \$30,000 where telehealth<sup>3</sup> technology will be used to demonstrate an impact in transitions of care between a comprehensive care facility (CCF)<sup>4</sup> and a general acute care hospital in Maryland. The pilot will use telehealth technology and assess its impact on hospital emergency room visits, admissions, and readmissions from a CCF to a general acute care hospital. The awardee will be required to use an electronic health record (EHR) and services of the State-designated health information exchange (HIE), the Chesapeake Regional Information System for our Patients (CRISP).<sup>5</sup> The awardee will report on the impact of telehealth on select clinical goals.

#### **II. REQUIREMENTS**

The awardee will implement a nine-month pilot that includes the following entities: (1) a general acute care hospital; (2) a CCF; and (3) a telehealth technology vendor. The applicant must identify the prime recipient of the grant award and the participating organizations that, combined, form the applicant. Any of the required entities could be the applicant. The goal of the grant is to demonstrate the impact(s) of using telehealth technology to improve transitions of care between a CCF and a general acute care hospital. The CCF and general acute care hospital must use CRISP services, including the encounter notification service (ENS) and query portal. The awardee will be

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<sup>1</sup> Md. Code Ann., Health-Gen. §19-109 (2014).

<sup>2</sup> Senate Bill 776, *Telemedicine Task Force – Maryland Health Care Commission*, (Chapter 319, 2013 Regular Session). Available at: [mgaleg.maryland.gov/2013RS/chapters\\_noln/Ch\\_319\\_sb0776E.pdf](http://mgaleg.maryland.gov/2013RS/chapters_noln/Ch_319_sb0776E.pdf).

<sup>3</sup> Telehealth is the delivery of health education and services using telecommunications and related technologies in coordination with a health care professional.

<sup>4</sup> The term in Maryland law for a nursing home, sometimes also known as a Medicare skilled nursing facility (SNF).

<sup>5</sup> Additional information about CRISP is available online here: [crisphealth.org](http://crisphealth.org).

required to submit a report<sup>6</sup> at the conclusion of the grant that assesses the pilot and describes the results of the pilot from the perspectives of both the participating hospital and the participating CCF. The report should document the lessons learned and assess the feasibility of the hospital and the CCF continuing the telehealth program after the pilot period.

## A. TASKS

To be considered for a grant award, an applicant is required to:

1. Propose a telehealth technology use case that meets the following requirements:
  - a. Reduce hospital emergency room visits, admissions, and readmissions from the CCF;
  - b. Improve transitions of care between a CCF and a general acute care hospital by reducing hospital readmissions;
  - c. Expand clinical expertise available at the CCF; and
  - d. Describe how the pilot will maximize the use of telehealth, CRISP (and any other HIEs), and EHRs.
2. Secure a 1:1 financial match with a maximum of 20 percent of the match being in-kind technical professional hours provided by information technology staff or consultants. Clinical care hours attributed to work on the pilot are excluded from contribution to the match.
3. Using the following table as an example, identify at least three clinical goals of the pilot that can be evaluated pre- and post-implementation of telehealth technology. The quality measures should be clear and verifiable, and tied to a project objective, with monthly milestones. The goals must:
  - a. Include measure(s), key definitions for all terms of each measure, and a baseline definition (see below table for format); and
  - b. Include a numerator and denominator, and identify of how the numerator and denominator will be calculated.

Clinical Goals		
Measure <i>EXAMPLE</i>	Key Definitions <i>EXAMPLE</i>	Mechanism to Measure <i>EXAMPLE</i>
Percent change in hospital readmission rates for patients discharged from a general acute care hospital to the CCF <i>Suggested Denominator:</i> Total number of patients discharged from a general acute care hospital to the CCF within a month <i>Suggested Numerator:</i> Number of CCF patients readmitted for the same or related condition to a	<b>Hospitalization:</b> Transfer of a CCF resident to any general acute care hospital <b>Hospital Readmissions:</b> <i>Readmissions:</i> 1: Readmissions in the current month for the same or related condition to any acute care hospital 2: Readmissions in the pilot nine month period	<b>Denominator:</b> How the pilot participants plan to calculate the denominator (for example, calculated on a daily basis through EHR at the CCF by quality assurance nurse and then totaled for each quarter) <b>Numerator:</b> How the pilot participants plan to calculate the numerator (for example,

<sup>6</sup> Length not to exceed ten content pages.

Clinical Goals		
Measure <i>EXAMPLE</i>	Key Definitions <i>EXAMPLE</i>	Mechanism to Measure <i>EXAMPLE</i>
general acute care hospital within a month  <i>Percent Change:</i> A month performance period minus a month base line performance period from the previous year	<i>Baseline:</i>  1. Readmissions in the same month in the prior year. The prior month refers to the same month in the prior year to the start of the pilot  2. Readmissions in the same nine month one year previous	calculated on a daily basis through the EHR at the CCF by nurse and then totaled for each quarter)

Key tasks following an award:

1. Submit a final report (not to exceed 10 pages) at the conclusion of the grant that includes:
  - a. Description of the technology infrastructure used at the hospital and CCF, including EHRs, HIE, and telehealth equipment;
  - b. Lessons learned;
  - c. Pilot implementation challenges, both expected and unexpected, how these challenges were addressed, and whether or not they were mitigated;
  - d. Cost effectiveness of implementation strategies;
  - e. Results of the assessment;
  - f. Sustainability prospects;
  - g. Additional other metric(s) that may be valuable to the assessment; and
  - h. Recommendations for continuation or replication of the pilot.
2. Throughout the duration of the grant award:
  - a. Participate in bi-weekly update conference calls with pilot participants and MHCC; and
  - b. Submit monthly reimbursement requests along with supporting documentation, and an update on the progress of making use of telehealth technology and achieving the clinical goals, which will serve as an audit trail for both the grant award and matching funds that will be tied to the awardee's achievement of all measurable goals.

**The MHCC and the awardee must agree on all activities specific to each task prior to the awardee's performance of the work, and MHCC will determine whether a task is satisfactorily complete before the task will be considered complete for payment.**

## **B. REQUIRED QUALIFICATIONS**

The applicant must have experience in telehealth and HIE deployment. The ideal applicant will have experience deploying health information technology in CCFs. The applicant must

include a letter(s) of support from each participant organization(s) that summarizes activities planned for the pilot for each of the grant participants and commitment to complete the work within the pilot project plan timeline.

### C. GRANT TASKS & DUE DATES

Grant Tasks	Due Date
Participate in bi-weekly status conference calls with pilot partners and MHCC	Ongoing
Submit monthly update on the progress of making use of telehealth technology and achieving the clinical goals	By fifth business day of following month
Submit monthly reimbursement requests	By 15 <sup>th</sup> day of following month
Draft project plan and kick-off meeting	9/26/14
Final project plan	10/3/14
<b>LTC telehealth use case pilot</b>	
Draft of the clinical quality measures	10/10/14
Begin implementing the pilot	10/15/14
Conclude implementation of the pilot	7/31/15
<b>Final Report – Sections due to MHCC</b>	
<i>Outline</i>	
Draft	6/1/15
Final	6/15/15
<i>Description of the technology infrastructure used at the hospital and CCF including all EHRs, HIE, and telehealth equipment</i>	
Draft	6/19/15
Final	6/26/15
<i>Lessons learned, and pilot implementation challenges</i>	
Draft	7/10/15
Final	7/25/15
<i>Cost effectiveness and sustainability prospects</i>	
Draft	7/15/15
Final	7/29/15
<i>Results of the Final Report and recommendations for replication</i>	
Draft	7/31/15
Final	8/15/15
<i>Compiled report final draft</i>	8/15/15

*Note: Grant tasks/due dates are tentative and subject to change at the discretion of MHCC, after discussion with the awardee, and are not listed within the table in any particular order.*

### D. STAFFING AND PERSONNEL REQUIREMENTS

An applicant may propose to augment or revise the following list of required personnel.

Labor Categories	Description
Project Director	A senior level individual that will coordinate all aspects of the work, and take responsibility for meeting the schedule of tasks.

Labor Categories	Description
Technical Manager	A management level individual with experience in managing technology deployment that can ensure staff training and utilization of the technology among all participants.
Clinical Consultant	A licensed health care practitioner that will work on the pilot, using the telehealth technology, and provide consultation to the Technical Manager to increase the effectiveness of the use of telehealth technology and redesign clinical processes.

#### **E. TERM OF GRANT**

The grant begins on or about **September 26, 2014** and will end **August 30, 2015**.

Awardee submission of reimbursement requests is required by the 15<sup>th</sup> of the month for the prior month and must include a description of the completed tasks in accordance with the Task Schedule in Section II, as well as supporting documentation for requested funds and match contribution. The supporting documentation must be of a quality that will withstand an audit. All tasks and work performed, and all reimbursement request documentation included must be to the satisfaction of MHCC for reimbursement approval.

If it becomes necessary to revise this announcement for grant applications before the due date for applications, amendments will be announced on the MHCC website. Multiple and/or alternate applications will not be accepted. The MHCC will not be responsible for any costs incurred by an applicant in preparing and submitting an application or in performing any other activities relative to this grant notification. The MHCC reserves the right to cancel this announcement for grant applications, accept or reject any and all applications (in whole or in part) received in response to this announcement for grant applications, to waive or permit cure of minor irregularities, and to conduct discussions with all qualified or potentially qualified grant applicants in any manner necessary to serve the best interests of the MHCC and accomplish the goals of this grant announcement.

Before an entity can do business in the State it must be registered with the Department of Assessments and Taxation, State Office Building, Room 803, 301 West Preston Street, Baltimore, Maryland 21201. It is strongly recommended that any potential applicant complete registration prior to the due date for receipt of applications.

#### **F. HOW TO APPLY**

An applicant submitting a grant application must follow the requirements detailed below. Grant applications are due to MHCC by 5:00 p.m. Eastern on **Friday, September 5, 2014**. Applications must be submitted via email to [sarah.orth@maryland.gov](mailto:sarah.orth@maryland.gov).

All questions regarding this announcement for grant applications should be submitted via email to [sarah.orth@maryland.gov](mailto:sarah.orth@maryland.gov); all questions and responses will be posted on the MHCC website.

#### **G. REQUIREMENTS FOR APPLICATION**

An application must be prepared in a clear and precise manner and address all requested items, as described below, in 15 or fewer pages. Original and creative approaches to using telehealth are encouraged. The application **MUST** contain the following sections:

1. *Cover page*: A completed template cover page in Attachment A to this announcement.
2. *Scope of work*:
  - a. *Executive Summary*. A half-page overview of the purpose of your organization's application, summarizing the key points.
  - b. *Statement of the Problem*. Clearly state the problem that needs to be solved and the objective of the proposed telehealth initiative. Please limit to one page.
  - c. *Scope of work and strategy*. This section should describe the proposed telehealth project. Address the requirements for each task and describe how the proposed services, including the services of any proposed sub-awardee(s), will meet or exceed the requirement(s). Include a concise and detailed description of the scope, breadth, and plans/approach for completing each task described in Requirements (Section IIA, above), including how the applicant plans to complete the tasks to the highest level of quality and in a timely manner.

The application should be structured using the sections detailed below. Where relevant, technical architecture and clinical workflow diagrams should be used to depict the proposed telehealth pilot. Information submitted in the Appendices should be specific to support the application, and not simply technical brochures. Material in the Appendices is not included in the total page count. MHCC may request additional material, if needed for clarification, during evaluation of grant applications.

- i. *Project Description*
  - a) What will the pilot do? What is the overarching purpose of the pilot? What are the key programmatic components of the project? Quite literally, who will do what for whom, with whom, where, and when?
  - b) What will be the benefits and measurements of success? If the pilot is successful, what visible, tangible, objectively verifiable results will you be able to report at the end of the pilot? What longer-term benefits do you expect for the target population and the broader community? What is the envisioned benefit of implementing telehealth technology?
  - c) How will the pilot be sustained after grant support ends? Will the pilot require ongoing outside support after the proposed grant ends? If plans are not yet firm, what process will you employ to work towards sustainability?
  - d) Describe the demographics of the CCF and the general acute hospital. What size is the CCF? Describe current general hospital admission and readmission rates for CCF residents. Identify the health conditions responsible for most hospitalizations from the CCF. Explain the current relationship between the hospital and the CCF

and the expected impact of the telehealth pilot. What is the payor mix of the CCF?

ii. Work Plan

- a) What is the timeline for accomplishing specified tasks? Prepare a Gantt chart or other timeline listing project tasks and the time period over which these tasks will be undertaken. The work plan chart may be attached as an appendix item to the application.
  - b) The specific methodology and techniques to be used in executing the tasks should be included in this section.
  - d. *Applicant qualifications:* Describe the qualifications of the organization(s) that will be participating in the tasks under the grant, including each organization's experience in performing similar work and, if applicable, work performed specifically related to assessing, developing, and managing telehealth. The applicant must demonstrate how it meets the qualifications requirements in Section IIB, above. Please limit to one page.
  - e. *Experience and qualifications of the proposed staff:* Describe the experience and qualifications of the proposed staff in performing similar work and, if applicable, work performed specifically related to telehealth. The grant applicant must demonstrate how its proposed staffing model meets the staffing requirements and required personnel described in Section IID, above, and, if applicable, as augmented by the applicant. Other essential staff, their roles in the pilot, and their relevant qualifications should be identified. Please limit to one page.
3. *Additional documentation:* An applicant must include as an appendix (appendices are not included in the Scope of Work page count) to the application an individual resume or detailed biography for each of the personnel who will be assigned if the applicant is awarded the grant. Sub-awardees, if any, must be identified, and a detailed description of their contributing role(s) relative to the requirements must also be included in the application. Each resume or biography must include the amount of experience the individual has completed of the type of work and tasks detailed in this grant announcement.
  4. *Financial proposal:* The financial proposal must include the costs of equipment proposed under the grant and the fully-loaded hourly rate for the work to be performed. Include an estimate of the total number of hours required to complete each task. Submit a budget for both award funds and matching funds using Attachment B. The financial proposal attachment is not included in the Scope of Work page count.
  5. *Letters of commitment:* Letters of intended commitment to work on the project from personnel from each organization must also be included as an appendix (appendices are not included in the Scope of Work page count) to the application. The letters of

commitment should contain a brief description (approximately one paragraph) of the work to be performed for the pilot by that organization.

6. *Disclosure:* An applicant must disclose any substandard quality of care level deficiencies, CMS admissions ban, and note any outstanding health and safety violations.

#### **H. TERMINATION CLAUSE**

The State of Maryland may terminate this grant award at any time and for any reason. An applicant must acknowledge this statement in its application for its response to be considered acceptable.

**MINORITY BUSINESS ENTERPRISES AND SMALL BUSINESSES  
ARE ENCOURAGED TO RESPOND TO THIS GRANT ANNOUNCEMENT**



## ***Attachment A: Application Cover Page***

### **Applicant Organization**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Federal Tax ID Number: \_\_\_\_\_

### **Official Authorized to Execute Contracts**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Project Director (or alternative staffing model)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Technical Manager (or alternative staffing model)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Clinical Consultant (or alternative staffing model)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Grant Request**

Project Title: \_\_\_\_\_

Amount Requested: \$\_\_\_\_\_ Match Contribution: \$\_\_\_\_\_

## ***Attachment B: Financial Proposal***

Organization Name: \_\_\_\_\_

Project Name: \_\_\_\_\_

<b>Revenues</b>	<b>Dollar Amount</b>	<b>Percent of Total Project Cost</b>
MHCC Grant Request		
Organization Match		
Other Grant/Funding Request		
<b>Total Project Cost</b>		

<b>Budget Request</b>	<b>Dollar Amount</b>	<b>Unit Cost</b>	<b>Identify Match or Grant Funds</b>
<b>Staff</b>			
% FTE, Name, Title			
% FTE, Name, Title			
% FTE, Name, Title			
<b>Item (specify)</b>			
<b>Item (specify)</b>			
<b>Item (specify)</b>			
<b>Item (specify)</b>			
<b>Item (specify)</b>			
<b>Item (specify)</b>			
<i>* Insert additional rows as needed</i>			
<b>Total</b>			